

2012 Heart Disease & Stroke Fact Sheet—Texas Health Service Region 3

Texas Department of State Health Services

Burden of Disease and Disease Risk Factors

Unadjusted Prevalence, Adults, 18 years and older Percentage of Adults (95% confidence interval)

	Region	Texas
Heart Disease	6.1 (4.9-7.4)	5.9 (5.3-6.4)
Stroke	2.6 (1.7-3.4)	2.7 (2.3-3.1)
Hypertension	33.6 (29.4-37.8)	29.8 (28.0-31.6)
Current Cigarette Smoking	17.3 (14.8-19.8)	18.2 (17.0-19.3)
Overweight and Obese	64.3 (61.2-67.5)	65.1 (63.6-66.5)

Heart disease, stroke and the risk factors for heart disease and stroke were as common in the region as they were statewide.

Age-Adjusted Death Rates, All Ages Annual Deaths per 100,000 Persons (95% confidence interval)

	Region	Texas
Heart Disease	173.3 (169.8-176.8)	174.4 (172.7-176.1)
Stroke	43.5 (41.7-45.3)	42.6 (41.7-43.5)

The risk of dying from heart disease and the risk of dying from stroke were as high in the region as in Texas overall.

Age-Adjusted Hospitalization Rates, Adults, 18 years and older Annual Hospitalizations per 10,000 Adults (95% confidence interval)

	Region	Texas
Heart Disease	108.9 (107.9-109.9)	112.9 (112.4-113.4)
Stroke	30.5 (30.0-31.1)	28.3 (28.1-28.6)

For every 10,000 adults, about 4 fewer hospitalizations occurred annually for heart disease and 2 more hospitalizations occurred annually for stroke in the region than in the state.

Cost Burden

Medicaid Spending among Beneficiaries with Cardiovascular Disease For Fee-for-Service & Primary Care Case Management Services

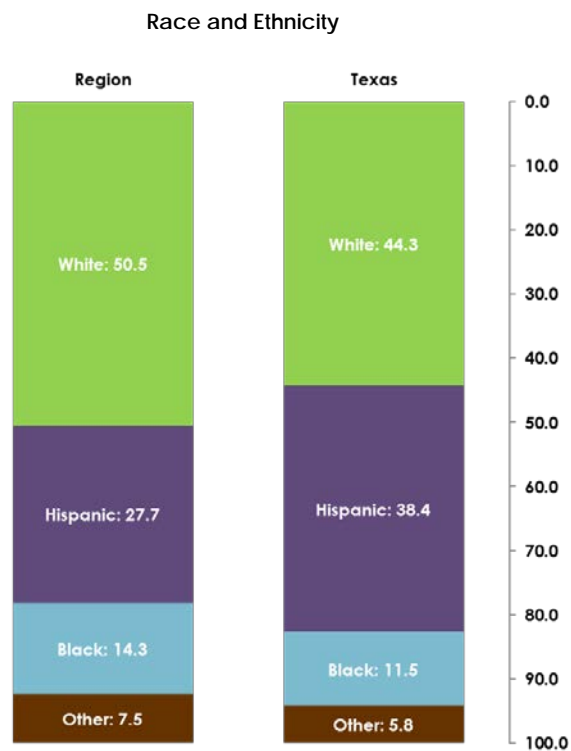
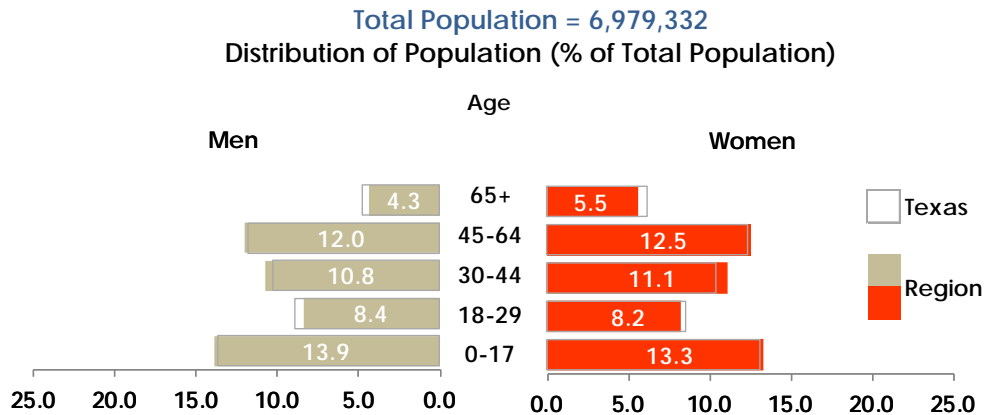
Type of Care	Region			Texas		
	Reimbursement Amount	*Number of Beneficiaries	Average Reimbursement per Beneficiary	Reimbursement Amount	*Number of Beneficiaries	Average Reimbursement per Beneficiary
Total	\$55,106,464.97	70,978	\$776.39	\$259,728,974.30	381,922	\$680.06
Inpatient	\$38,748,541.72	7,381	\$5,249.77	\$167,628,363.96	37,794	\$4,435.32
Outpatient	\$7,744,550.35	24,562	\$315.31	\$37,484,305.75	144,158	\$260.02
Professional	\$8,613,372.90	65,105	\$132.30	\$54,616,304.59	349,317	\$156.35

Medicaid spent \$776.39 per beneficiary with cardiovascular disease in the region, an amount higher than the state average. Specifically, Medicaid spent more on inpatient and outpatient services but less on professional services per beneficiary in the region than statewide.

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Demography



Data Sources: (1) 2012 Texas Vital Statistics, Population Data; (2) 2012 Texas Vital Statistics, Mortality Data; (3) 2012 Texas Hospital Inpatient Discharge Public Use Data File; (4) 2012 Texas Behavioral Risk Factor Surveillance System; and (5) 2012 Texas Medicaid Reimbursement Data as prepared by Research Team, Strategic Decision Support, Texas Health and Human Services Commission, Sep. 2013.

Case Definitions: Mortality based on ICD-10 codes for heart disease (I00-I02, I05-I09, I11, I13, I20-I25, I26-I28, I30-I51) and stroke (I60-I69). Hospitalizations based on ICD-9 codes for heart disease (390-398, 402, 404, 410-429) and stroke (430-434, 436-438). Prevalence based on self-reported (1) diagnosis of heart attack/myocardial infarction, angina, or coronary heart disease for heart disease; (2) diagnosis of stroke; (3) diagnosis of hypertension, not during pregnancy; (4) having smoked 100 cigarettes in their lifetime and now smokes every day or some days for current cigarette smoking; and (5) body mass index of 25 or greater calculated from height and weight. Medicaid reimbursement based on paid and partially paid claims for fee-for service and primary care case management services selected from the Texas Medicaid and Health Partnership (TMHP) Ad Hoc Query Platform (AHQP) Claims Universe of persons with a primary diagnosis of cardiovascular disease (ICD-9: 390-459).

*A beneficiary may receive more than one type of care; therefore, the sum of beneficiaries receiving each type of care does not equal the total number of beneficiaries.

Note: "-" indicates too few cases occurred, the sample size was too small, or the relative standard error was >30.0% to provide a reliable estimate.

Statistical significance based upon evaluation of non-overlapping confidence intervals.



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